Gas Strength and Tightness Testing (Non Domestic)

Enter Company Gas Safe Registration Number 12770

CUSTOMER DETAILS

Name (Mr/Mrs/Miss/Ms) ENGIE

Address DERWENT APARTMENTS
19 ENDCLIFFE CRES
SHEFFIELD Postcode S103AG

Tel No

Contract Number

SERVICE CENTRE

Address

Postcode

Tel No

Indicate work undertaken	Tightness test	✓ Strength test
Scope of works PPM	Job No	DER001

Test Instrument	
Type (water/elec etc)	ELECTRONIC
Serial No if applicable	5709264117

TIGHTNESS TEST DETAILS	TPCP1	TPCP1A
Tested To TPCP1 or TPCP1A tick as appropriate		✓
Gas type Natural Gas (NG) Liquefied Petroleum Gas (LPG)		NG
Installation - New (N) - New extension (NE) - Existing (E)		E
Could weather/changes in temperature affect test? Yes/No		
Meter type (Diaphragm, Rotary etc) (N/A if meter not included in test)		DIA
Meter designation (U16, U40, P7 etc) (N/A if meter not included in test)		U160
Pressure bypass installed if applicable (Yes/No/NA)		No
Gas meter volume (m^3)		0.304
Installation volume pipework and fittings (m^3)		0.0713
Installation volume total (m^3)		0.375
Test medium - fuel gas, air		FUEL
Tightness test pressure (TTP) mbar/bar		21
Gauge GRM		0.5
Pressure gauge type (water, high SG, electronic etc)		ELECT
Maximum permitted leak rate (MPLR) m^3/h		
Maximum Permitted pressure drop (mbar)		3.8
Let-by test period (minutes)		2
Stabilisation period (minutes)		6
Tightness test duration (TTD) (minutes)		3
Any inadequately ventilated areas to check? Yes/No		No
Is barometric pressure correction necessary? Yes/No		
FINDINGS		
Actual pressure drop (if any) mbar		Ø
Actual leak rate m3/hr		
Have inadequately ventilated areas been checked? Yes/NA		N/A
Tightness test Pass or Fail		PASS

STRENGTH TEST DETAILS	
State test method Pneumatic (P) or Hydrostatic (H)	
Installation - New (N) - New extension (NE) - Existing (E)	
Have components not suitable for strength testing been removed or isolated from installation as necessary (Yes/NA)	
Calculated strength test pressure (STP) (m/bar/bar)	
Test medium - air, nitrogen, water (hydrostatic test) etc	
Stabilisation period (minutes)	
Strength test duration (STD) (minutes)	
Permitted pressure drop (% STP)	
Calculated pressure drop (mbar/bar)	
FINDINGS	
Actual pressure drop (mbar/bar)	
Strength test Pass or Fail	

DECLARATION OF GAS SAFETY - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety [redacted] (Installatio[redacted]andards and procedures.

Engineers [redacted] Date 11 Nov 2020

Print Name [redacted]

Responsible Person's Signature

Attention : Where additional safety checks have been necessary to ensure the gas system is safe, the responsible person has been informed and has accepted the results. The installations has been left operational.

NOTIFICATION OF UNSAFE GAS INSTALLATION - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and Use) Regulations, industry standards and procedures. However, an unsafe gas installation has been identified, details of which are listed on a separate Warning/Advice Notice.

Engineers Signature Date

Print Name

Responsible Person's Signature

Copies : WHITE - Customer Copy YELLOW - Site Copy PINK - Office Copy GREEN - Engineer's Copy

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 1 of 2 Ser No. 31561

Engineer [redacted]

Gas Safe [redacted]

Engie Office Address
14 ENDCLIFFE AVE
S10 3GA

Contract Number U of S
Customer Name ENGIE
Site Address DERWENT APARTMENTS
SHEFFIELD
Postcode S10 3AG
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

12770
Enter Company Registration Number

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/NS/FL)
1	YES	SERVICE	DERWENT PLANT ROOM	CHB N°1	WB3A 60kW	7176779	VIESSMANN	OF
2	YES	SERVICE		CHB N°2	WB3A 60kW	7176779	VIESSMANN	OF
3	YES	SERVICE		CHB N°3	WB3A 60kW	7176779	VIESSMANN	OF
4	YES	SERVICE		CHB N°4	WB3A 60kW	7176779	VIESSMANN	OF

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	N/A	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fail to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation

Low level free area cm² or ventilation flow rate inlet m³/h	Actual 3,560.56	Required (Calculated) 2,376.00	
High level free area cm² or ventilation flow rate extract m³/h	Actual 3,349.42	Required (Calculated) 1,584.00	
All ventilation grills clear and unobstructed (Yes/No) YES	Fans and/or flue interlocks operating correctly (Yes/No/NA) N/A		

Details of any faults	Remedial Action Taken	Comments and calculations
ADEQUATE VENTILATION, INCORRECTLY SITED		
CHB N°1 RECEIVING PCB – PLANT ISOLATED.		

Appliance Checks	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Flue flow test satisfactory (Yes/No/NA)	N/A	N/A	N/A	N/A
Spillage test satisfactory (Yes/No/NA)	N/A	N/A	N/A	N/A
Air/Gas switch operating correctly (Yes/No/NA)	YES	YES	YES	YES
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	YES	YES
Burner lock out time (seconds)	2.09 TESTED	164	153	147
Temperature and limit thermostats operating correctly (Yes/No)		YES	YES	YES
Heat net input rating data (kW)		60	60	60

	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Gas burner pressure (mbar) or heat input kW/h required	7	60	60	60
Gas burner pressure (mbar) or heat input kW/h measured	9	57.81	63.59	60.70
Gas rating measured (kW/h / NA)	3	6.00	6.60	6.30
Air/gas ratio control setting (%/NA)	1	N/A	N/A	N/A
Net flue gas temperature (gross less ambient) (°C)	15	62.2	54.4	55.5
Oxygen (O_2 %)	1	6.7	8.9	7.4
Carbon Monoxide (CO)(ppm)	5	12	8	9

	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Carbon Dioxide (CO_2) (%)	7	8.11	6.87	7.68
Excess Air (%)	9	N/A	N/A	N/A
CO/CO_2 Ratio		0.00 0.01	0.00 0.01	0.00 0.01
Gross Efficiency (%)	TEST	87.9	88.3	88.3
CO flue dilution (ppm)		N/A	N/A	N/A
Standing pressure (mbar)	15	24.8	24.8	24.8
Working pressure (mbar)	5	22.4	22.6	22.7
Is appliance safe for use (Yes/No)		YES	YES	YES

Has a warning advice notice been raised (No or Warning notice Ser No or No's): No

Test Instrument: TESTO 327/1

Test Instrument serial number: 02596772

Worksheet No (if used)	DER 001
Checked by (office use)	
Entered on database	

Declaration of [redacted] completed in accordance with [redacted] has been satisfactorily [redacted] standards and procedures.

Date

Signature [redacted] 13TH NOVEMBER 2020

Distribution: White - Customer, Yellow - Service Centre, Pink - Site, Green - Engineer

GAS SAFETY CERTIFICATE

This form can be used as a Landlord's gas safety certificate

Page 2 of 2 Ser No. 31562

Engineer [redacted]

Gas Safe Card [redacted]

Engie Office Address
14 ENDCLIFFE AVE
S10 3EA

Contract Number U of S
Customer Name ENGIE
Site Address DARWENT APARTMENTS
SHEFFIELD
Postcode S1 0 3AG
Received By Signature

Landlords Details If Different
Name
Address
Postcode
Rented Accommodation YES/NO

12770
Enter Company Registration Number

App	Landlords appliance Yes/No	Service Inspection Repair	Appliance Details: Location	Type	Model	Serial Number	Burner Manufacturer	Flue Type (OF/RS/FL)
1	YES	SERVICE	DARWENT PLANT ROOM	CHB Nº 5	WB3A 60kW	7176779	VIESSMAN	OF
2	YES	SERVICE		CHB Nº 6	WB3A 60kW	7176779	VIESSMAN	OF
3	N/A	N/A		N/A	N/A	N/A	N/A	N/A
4	N/A	N/A		N/A	N/A	N/A	N/A	N/A

General Safety Checks	Result	General Safety Checks	Result
Gas booster/compressor operating correctly (Yes /No/NA)	N/A	Flue termination satisfactory (Yes/No/NA)	YES
Is there a current gas installation line diagram at primary meter (Yes/No/NA)	YES	Has a tightness test been carried out from local isolation valve (Yes/No/NA)	YES
Is the meter installation correct (Yes/No)	YES	Is gas pipework electrically bonded (Yes/No)	YES
Gas installation pipework adequately supported (Yes/No)	YES	Are adequate emergency isolation valves fitted (Yes/No)	YES
Gas installation pipework sleeved and sealed as appropriate (Yes/No)	YES	Are emergency valve handles in place and labelled (Yes/No)	YES
Is gas pipework colour coded or identified (Yes/No/NA)	YES	Do valves fall to the correct position (Yes/No)	YES
Is flue system installed in accordance with standards (Yes/No)	YES	Area clear of combustible materials (Yes/No)	YES

Ventilation			
Low level free area cm² or ventilation flow rate inlet m³/h	Actual 3,560.56	Required (Calculated) 2,376.00	
High level free area cm² or ventilation flow rate extract m³/h	Actual 3,349.42	Required (Calculated) 1,584.00	
All ventilation grills clear and unobstructed (Yes/No)	YES	Fans and/or flue interlocks operating correctly (Yes/No/NA)	N/A

Details of any faults	Remedial Action Taken	Comments and calculations
ADEQUATE VENTILATION, INCORRECTLY SIZED		

Appliance Checks	App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low		App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low		App 1 or App 1 High	App 2 or App 1 Low	App 3 or App 2 High	App 4 or App 2 Low
Flue flow test satisfactory (Yes/No/NA)	N/A	N/A	N/A	N/A	Gas burner pressure (mbar) or heat input kW/h required	60	60	N/A	N/A	Carbon Dioxide (CO_2) (%)	9.12	8.82	N/A	N/A
Spillage test satisfactory (Yes/No/NA)	N/A	N/A	N/A	N/A	Gas burner pressure (mbar) or heat input kW/h measured	57.81	52.03	N/A	N/A	Excess Air (%)	N/A	N/A	N/A	N/A
Air/Gas switch operating correctly (Yes/No/NA)	YES	YES	N/A	N/A	Gas rating measured (kW/h / NA)	6.00	5.40	N/A	N/A	CO/CO_2 Ratio	0.003	0.001	N/A	N/A
Flame proving devices operating correctly (Yes/No/NA)	YES	YES	N/A	N/A	Air/gas ratio control setting (%/NA)	N/A	N/A	N/A	N/A	Gross Efficiency (%)	88.5	88.7	N/A	N/A
Burner lock out time (seconds)	151	155	N/A	N/A	Nat flue gas temperature (gross less ambient) (°C)	50.5	53.1	N/A	N/A	CO flue dilution (ppm)	N/A	N/A	N/A	N/A
Temperature and limit thermostats operating correctly (Yes/No)	YES	YES	N/A	N/A	Oxygen (O_2 %)	5.3	5.4	N/A	N/A	Standing pressure (mbar)	24.8	24.8	N/A	N/A
Heat net input rating data (kW)	60	60	N/A	N/A	Carbon Monoxide (CO)(ppm)	4	13	N/A	N/A	Working pressure (mbar)	22.0	22.4	N/A	N/A
										Is appliance safe for use (Yes/No)	YES	YES	N/A	N/A

Has a warning advice notice been raised (No or Warning notice Ser No or No's)	NO
Test Instrument	TESTO 327/1
Test Instrument serial number	02596772

Worksheet No (If used)	DSL001
Checked by (office use)	
Entered on database	

Declaration of gas safety - I confirm that all of the above work described on this form has been satisfactorily completed in accordance with the current Gas Safety (Installation and use) regulations, standards and procedures.

Date 13TH NOVEMBER 2020

Signature [redacted]

Distribution: White - Customer, Yellow - Service Centre, Pink - Site, Green - Engineer